

GME Annual Institutional Review (AIR)

Purpose

The purpose of this policy is to establish an Annual Institutional Review (AIR) policy that is compliant with the ACGME Institutional Requirements (I.B.5.):

- I.B.5. The GMEC must demonstrate effective oversight of the Sponsoring Institution's accreditation through an Annual Institutional Review (AIR).
- I.B.5.a) The GMEC must identify institutional performance indicators for the AIR, which include:
- I.B.5.a).(1) results of the most recent institutional self-study visit;
 - I.B.5.a).(2) results of ACGME surveys of residents/fellows and core faculty members; and,
 - I.B.5.a).(3) notification of each of its ACGME-accredited programs' accreditation statuses and self-study visits.
- I.B.5.b) The AIR must include monitoring procedures for action plans resulting from the review.
- I.B.5.c) The DIO must submit a written annual executive summary of the AIR to the Governing Body.

Policy

In December of each year the DIO or Delegate will chair a committee charged with conducting the Annual Institutional Review (AIR). The time period of review for the AIR will be the previous academic year. Areas reviewed by the committee should include, but are not limited to:

- Most recent Institutional Letter of Notification (LON)
- Most recent CLER report
- Institutional Self-Study Report (if available)
- Aggregated Faculty ACGME Survey Reports
- Aggregated Resident ACGME Survey Reports
- Standing Committee Annual Reports
- ACGME Attachment #1 and/or most recent program LONs
- Resident funding
- NRMP results
- GME Office resources (i.e., staffing, facilities)
- Program Self-Study and Pre Self-Study Reports
- Special Program Review Reports
- Common themes emerging from APE Reports
- Institutional wellness initiatives
- Institutional quality improvement/patient safety initiatives
- Other Program performance indicators

AIR Committee Membership and Process

AIR committee membership will be determined by the AIR Committee chair.. Representation on the AIR will include at least three Program Directors representing surgical, medical and hospital-based programs, respectively. In addition, the AIR committee will include at least one Resident, one Fellow and one Program Coordinator. The AIR committee will begin the AIR in December of each year. The AIR will include review of documents supporting the areas listed in the Policy section of the document. Review will include a Strengths, Weakness, Opportunities and Threats (SWOT) analysis and generation of an Action Plan. The committee members will determine the number of meetings and length of time needed to complete the process.

AIR Report and Action Plan

The *AIR Report and Action Plan*, prepared by the AIR Committee chair, will be presented to the GME Executive Committee for approval. The approved *AIR Report and Action Plan* will be distributed to members of the GMEC. Progress on Action Plan items will be monitored by the GME Executive Committee.

References ACGME Institutional Requirements effective 7/1/2015 I.B.5.